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**11** Number of Pages (including this page)

Date: January 20, 2005

To: Charles R. Kasenge - 2125

Location: United States Patent and Trademark Office

Fax No.: 703-872-9306 Centralized Facsimile

From: Kevin D. Wills - 43,993

Subject: 10/622,521- Dan Littlejohn Confirmation No.: 4111

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**MESSAGE:**

Enclosed herewith, please find AMENDMENT for filing in the below-identified application.

**PLEASE GIVE THESE PAPERS TO:****EXAMINER:****Charles R. Kasenge****GROUP ART UNIT:****2125****SERIAL NO.:****10/622,521****FILED:****JULY 18, 2003****INVENTOR:****DAN LITTLEJOHN**

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in this Submission

	Application Number	10/622,521
	Filing Date	July 18, 2003
	First Named Inventor	Dan Littlejohn
	Group Art Unit	2125
	Examiner Name	Charles R. Kasenge
11	Attorney Docket Number	IS01087AP

**ENCLOSURES**

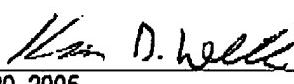
(check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-Related papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter with appropriate copies
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CDs _____	
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		

Remarks  
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual	Kevin D. Wills	Registration No.	43,993
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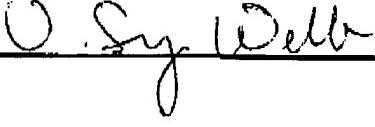
Signature	
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Date	January 20, 2005
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I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number 703-872-9306 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313 on the date listed below:

Typed or printed name	V. Lynn Webb
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Signature		Date	January 20, 2005
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Appl. No. 10/622,521  
Amtd. Dated January 20, 2005  
Reply to Office Action of November 17, 2004

Docket No. ISO1087AP  
Customer No. 23330

## UNITED STATES PATENT AND TRADEMARK OFFICE

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JAN 20 2005

APPLICANT(S)	Dan Littlejohn	GROUP ART UNIT: 2125
APPLN. NO.:	10/622,521	EXAMINER: Charles R. Kasenge
FILED:	July 18, 2003	Confirmation No. 4111
TITLE:	METHOD AND APPARATUS FOR DESIGN FOR MANUFACTURING	

AMENDMENT

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated November 17, 2004, please amend the above-identified application as follows:

This communication is responsive to the Office Action mailed November 17, 2004, Paper No. , concerning the above-identified application and is timely filed within the three month shortened statutory period for response which expires February 17, 2005.